



ARIZONA DEPARTMENT OF PUBLIC SAFETY  
STUDENT TRANSPORTATION, Mail Drop No. 1250  
P. O. Box 6638 Phoenix, AZ 85005-6638  
Phone: 602-223-2646 ■ FAX: 602-223-2923  
[www.azdps.gov/studenttransportation](http://www.azdps.gov/studenttransportation)  
[schoolbus@azdps.gov](mailto:schoolbus@azdps.gov)

## SCHOOL BUS DRIVER COVER SHEET

**INSTRUCTIONS:** This **MUST** be completed in full and submitted by employer.

Please check one of the following:

**CHECK ONE OF 4 ☐ -es BELOW**

☐ **NEW DRIVER APPLICANT**

☐ **CURRENT DRIVER**

☐ **TRANSFER**

☐ **REHIRE**

(effective date) \_\_\_\_\_

(effective date) \_\_\_\_\_

**DRIVER or APPLICANT NAME** Sylvester Quincy Driver  
*Print full name as it appears on driver's license*

**DISTRICT/EMPLOYER** Prickly Pear Unified

**DISTRICT/EMPLOYER NUMBER** #77

**TRANSPORTATION DEPT. PHONE NO.** 123-456-7890 **Ext.** 444

**CONTACT PERSON** Joe Director

**COUNTY** Maricopa

**CURRENT SCHOOL BUS DRIVER NUMBER --(FOR CERTIFIED DRIVERS)**  
(if applicable)